

NOVA

THE
OFFICIAL
MAGAZINE FOR
AUCKLAND DHB
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TE WHETU MARAMA



Some of the Auckland DHB Team taking up the Feetbeat Challenge

- Inside this issue:
- New leadership structure chart
 - Summary from at our best
 - Mother and baby unit opens

CEO Column



Staying
connected

Ailsa Claire
Chief Executive

Like most of you, I suspect, it has been quite satisfying to say a firm good bye to winter. This winter has been a tough one for us with a high number of very sick patients coming through our doors and a higher than normal amount of staff sickness. It's a credit to everyone concerned that we continued to deliver high quality care to meet the needs of our patients.

We managed this through hard work, but also because we were able to rely on some very experienced and capable people managing patient flow. Experience is what we will be celebrating in a new initiative, our Long Service Awards, coming in November. This annual event is to acknowledge the people who have chosen to dedicate a big part of their careers with us. It's wonderful that 135 people have chosen to work here for 30 years plus and their collective knowledge and experience is so valuable for us all.

In this issue is a chart that shows the clinical leadership that we have put at the heart of decision-making for our provider arm. We believe that the best decisions for patients should be made by those closest to them. But those decisions need to be well-supported by a management team with the right mix of skills.

You will note that the relevant Directorates have a Primary Care Director. These relatively new appointments have the job of actively managing the links and partnerships the Directorates have with primary and secondary care. They will work closely with PHOs, General Practice and other primary care organisations to build better communication and coordination around our services and the community.

Community health targets are an important part of our work. So I was very privileged to accept on behalf of our PHOs and Auckland DHB a certificate from Karen Evison and Bryn Jones, the Ministry of Health Target Champions for quit smoking and heart/diabetes checks, recognising Auckland DHB is one of the first to achieve these two key community health targets in September.

On the cover: Sue Copas, Susanne Biddick and Julie Helean from the Strategy, Participation and Improvement Unit out for a lunchtime walk as part of their Feetbeat challenge (see page 10).



Patients' applause

Here are some of the things people are saying about our team here at Auckland DHB:



My daughter and her friend were admitted to the emergency department after having a road accident. They both had to be cut out of the cars and had major injuries. The staff looking after them have been so good and we really appreciate what they are doing.

Parents of a patient

My husband had a stroke and needs assistance from a walker. When we were leaving the hospital after being with my daughter, a member of staff from Lab Plus could see we were struggling and he came over to see if we needed a hand. He helped my husband up the steps and walked us to the car park to make sure we got there safely. He was so kind.

The kindness we have received has been amazing. We really appreciate what all your staff have done so far.

Partner of a patient in Women's Health

In August my daughter was born after an extremely taxing and difficult labour. While the labour was not what we expected, the Auckland City Hospital team diligently and expertly cared for my partner.

She received the best possible care and I cannot express fully how thankful we are for the entire team, especially the obstetrician and paediatrician who spared my partner the need for surgery and my daughter a stay in NICU.

I'd like to thank all the staff of the labour and birthing ward as well as all the Tamaki ward midwives who made our stay comfortable and informative. We feel fully prepared for our new adventure and our healthy, beautiful daughter is testament to our gratitude.

Thank you to all the staff on Ward 23B. My son actually really enjoyed most of his hospital stay. I thought the staff all made a huge effort to ensure that he felt as comfortable as possible. It's good to know that he won't be terrified if he needs to come back and have any further investigations or treatment. What a well-organised and welcoming place you are all running.

Parent of a patient at Starship

TOP TWEETS



@Justina_Frost - I choose Green! Positive patient experience in @Akld_DHB Emergency Dept with my burnt South paw. Thanks for caring. pic.twitter.com/DYkvkEw4jc



@ParamedicsNZ - Good representation from paramedics at the @Akld_DHB Trauma Services Annual Conference. Nice to see a multi-disciplinary presence.



@AmerGastroAssn - Dr. Windsor from @Akld_DHB discusses nutrition in acute pancreatitis so your patients can get healthy & stay healthy: <http://ow.ly/yJQKv>



@hannahhannahhan - The people who work in the neurological ward at Auckland Hospital are extraordinarily lovely.

Follow **@Akld_DHB** for news, patient information and more.

New facilities for mums and babies



Board member Jo Agnew cuts the ribbon with Clinical Director Dr Peter Watson from Counties Manukau DHB and Emma Farmer, Head of Division - Midwifery Child, Woman and Family Service.

On Tuesday 16 September, a specialist Mother and Baby Unit that provides care for new and expectant mothers with mental health conditions was officially opened at the Child and Family Unit of Starship Children's Hospital.

Dr Clive Bensemann, Director of Mental Health, says early close contact between babies and their parents is vitally important in supporting a baby's early development and physical and mental health.

"The newly developed ward aims to provide a warm and welcoming environment for a mother with mental health difficulties to receive care whilst maintaining a relationship with her baby," he says.

Speaking at the opening on behalf of the regional group leading the work, Clinical Director Dr Peter Watson said: "This is a completely new facility for mothers and their babies and one that has never been seen before in the northern region. It is an enormous step forward in providing such a specialist resource, which is just one piece of a much larger pathway of care."

The unit provides three beds in private rooms, family and whānau rooms, a kitchen, lounge area and observational rooms.

news in brief



Health Excellence Awards

We would like to say a big thank you to everyone who applied for the Health Excellence Awards 2014.

This is a wonderful opportunity to showcase the valuable, yet sometimes unacknowledged, work within the organisation. It is set to be an exciting event this year with two new categories widening the scope of our applications to embrace the areas of primary care.

Applications are now being reviewed by our expert judges and we look forward to seeing many of you at the awards ceremony on 3 December at the Auckland War Memorial Museum.

Celebrating dedication

On 17 November, we celebrate the commitment of our people who have served 30 years or longer with Auckland DHB. These two ceremonies kick off a wider range of initiatives being introduced this year to more consistently recognise long service within the organisation.

If you are one of these dedicated staff members who have been with us for 30 years or longer, you will soon receive your invitation to this celebration. Save the date!

Keep an eye out in the December issue of NOVA for coverage of the November events, together with more information about the new programme for staff long-service recognition.

Organ and Tissue Awareness Day

Organ Donation New Zealand (ODNZ) is holding an organ and tissue donation awareness day in October to encourage New Zealanders to talk about organ and tissue donation and the wishes of their families surrounding this important topic.

Auckland DHB is keen to promote this initiative, as donating an organ can save someone's life. Please play your part and look out for the ODNZ stand on Level 5, Auckland City Hospital on Friday 10 October. For more information please visit: www.donor.co.nz

Did you know?

- 1 million dollars is spent each year on waste management and disposal at Auckland DHB.
- 4 thousand - the number of school children hospitalised every year due to falls.
- 29 thousand - the number of words typed up from the 'In our Shoes' sessions with staff.
- 104 the number of shuttle bus trips made between Auckland and Greenlane every day.
- 600 more children came into the Children's Emergency Department in August compared with the same time last year.
- 2588 people engaged in defining values in July.

Welcome to our recent starters

THANKS FOR JOINING US!

Abel Smith, Aimee Murray, Alena-Rose Burt, Alex Anderson, Alexandra Blair, Alexandra Cave, Alexandra Marshall, Alisha Andrade, Alison Constable, Amanda Boshoff, Amanda Wards, Amandeep Kaur, Amelia Gilbert, Amy Bridge, Andrea Lovell, Andrew Reid, Andrew Wood, Angela Sharp, Angie Ma, Anna Ho, Anna Ouano, Anna-Marie Scroggins, Anneleen Goedgebeur, Annika Jarrett, Ansonette Willemse, Anu George, Aqeela Razvi, Arlene McLellan, Atafasia Konelio, Audrey Long, Barnett Bond, Ben Subritsky, Benjamin Griffiths, Beth Mconie, Bhumika Kohli, Brenda Witt, Camilla Rees, Carey-Anne Evans, Carla Saunders, Caroline Delamare, Casey Matthews, Catherine Powell, Cherian Thomas, Chris Va'afusuaga, Christina Pervan, Christine Miller, Coby Woller, Crescente Bao-As, Daphne Kumar, David Wilson, Dean Bunbury, Deborah Adesanya, Deborah Bassett, Deborah Fitzpatrick, Deborah Quigley, Debra Chalmers, Divya Puli, Eileen Yang, Emily George, Emily Sedon, Emma Appleton, Erika Ventura, Ervin Bagsic, Faith Guillermo, Farisha Ali, Farisha Osborne, Fiona Ibbott, Gareth Richards, Gareth Stanney, Gayle Yvonne Watt, Gemma Howell, Genevieve Batton, Gillian Jenkins, Gina Fernandez, Glenda Light, Glendil Malbog, Glenys Wilson, Grace Gaite-Monteith, Hana-Lee Redpath, Hannah Steedman, Harriet Sims, Heidi Baxter, Heidi Rambhai, Helene Wright, Hoi Lun Sito, Hong Li, Jane Gregory, Janine Bennett, Jan-Marie Ginnane, Jasmine Ah Colt, Jenifer Del Rosario, Jenna Bradley, Jeslie Devasahayam, Jesse Taylor, Jianwen (Linda) Xie, Jileen Bauto, Jithil Jacob, John David Reyes, John Perez, Julianne Ollerenshaw, Julie Tan, Justine Slow, Kamala Pitta, Kara Huddart, Kate Newland, Kate Nye, Kathleen Tarawa, Kathleeya Stang-Veldhouse, Katie Martin, Kerrie Mace (McAllister), Kieran Barling, Kim Reynish, Kimberley Newman, Kristin Herman, Kristina Behn, Kyle Tam, Kylie Blomquist, Lara Baylis, Laura Jackson, Lauren Mcneil, Leanne Best, Lee Mcgarva, Lesley-Ann Smith, Li Zhao, Lin Lin, Linda Berkett, Linda Gray, Linden Lely, Lisa Andrew, Lisa Young, Loriza Khan, Louise Ayrey, Lucia Devoy, Lucy Davis, Lucy Laird, Luningning Lainez, Maria Hermoso, Maria Mateo, Mariam Korkis, Marika Beauvais, Marilyn Lewis, Marina Negri, Marisol Manalili, Martha Kainuku, Mary Berryman, Matangaro Jones, Matthew McCormick, Maya Kochery Ammini, Meagan Chemaly, Meleilani Neale, Melissa-Ria Bagunu, Michael Clews, Michelle Beh, Michelle Mulligan, Mike Shang, Ming Cen, Miriam O'connor, Muneer Mohammed, Nadine Chapel-Toi, Nan Li, Naomi Tuilagi, Natalie Kettle, Natasha Ferguson, Natasha Pool, Natish Mareikura, Neekita Devi Singh, Nick Pak, Nicky Tsao, Nicola Bargiacchi, Nicola Summerfield, Nicole Bone, Noline Lyman, Ora Emslie, Paul Ripley, Paul Sanders, Penelope Impey, Penina Felise-Mackay, Philippe Emile, Pratiksha Sandhu, Preetika Sharma, Puleiala Tofaeono, Raksha Kumar, Rangimarie Kareko, Rebekah Brine, Rebekah Kelsey, Renee Hartshorne, Rita Shahmohammadi, Ritchie Dolman, Rochelle Boylan, Rohan Davey, Rongguang Tang, Roopa Krishnaswamy, Ruth Aubrey, Sabrina Mathur, Sally Bruce, Sally Levie, Samantha Cawte, Santosh Parab, Sarah Himme, Sarah Mayer, Sarah Menzies, Sarah Podmore, Saras Pillay, Savitha Soans, Sera Tagaloa, Shakira Camp, Shankara Char, Shivneel Pal Singh, Sinan Kamona, Snehal Patel, Sophie Collis, Soumya Xavier, Stephanie Clark, Stephanie Hamlin, Stephanie Shaw, Stephanie Stanley, Sue Nash, Summer Dawn, Sunkang Her, Susan Copas, Susan Horobin, Talal Al-Asadi, Tauafu Moala, Te Wai Barbarich, Teri Vipond, Terry Bell, Tirisa Watta, Tracey Cadogan, Vandna Oberoi, Victoria Bednarek, Virginia Cowan, Yongying He, Yu Ling Ho, Zhaoxin Li

Our local heroes

Congratulations to our August and September local heroes – Miriam Beavis and Sally Taamo.

Miriam was nominated by a patient who told us:

"I had an extreme fear of hospitals and Miriam's manner and attitude helped to hugely alleviate those fears. She went above and beyond her duty by coming and seeing how I was coping even if she wasn't working in my room that shift.

Miriam was there by my side when I had all these strange hospital procedures. She made me feel that it was ok to be scared and cry if I needed, she never looked down on me if I cried and couldn't cope.

She showed only compassion and tried to make me laugh instead. And, because of her, my fear of hospitals is gone. So I owe a lot to her and this is one way I can say thank you and show my appreciation."

Sally was nominated by the team in the Rangitoto Ward. The staff there told us:

"Sally is our tea lady. She brightens up everyone's day and the patients love to see her. After the first time she makes a drink for someone she knows exactly how to make their hot drinks without asking. She is very good at reading patient boards and takes note of their diet or whether they are 'nil by mouth'. She will even return to the kitchen if a patient hasn't received the right meal. She is always very friendly with staff, patients and visitors."

Please keep your stories about our local heroes coming in.

To nominate go to: www.adhb.govt.nz/localheroes

Miriam Beavis receiving her local hero award from Chief Executive Ailsa Claire.



Sally Taamo receives her local hero award from Ailsa Claire.

Congratulations to everyone nominated as August and September local heroes:

Alice Falemaka	Marjoljin Guicherit
Alison Boggs	Mawada Toyyer
Barbara Ferguson	Melissa Hobbs
Dr Boris Lowe	Nicola Roberts
Colleen Gibbs	Olga Brochner
Dr David Rowbotham	Dr Paul Hoffman
Indu Nanubhai	Rosemary Ellyett
Julie Hagen	Tracey Wright
Julie Helean	Trevor Anderson
Leigh Elton	Zaldy Lara
Lorraine Aramoana-Thompson	
Lynne Belz	

local heroes is kindly supported by A+ Trust

at our best – tihei mauri ora

In July 2014, we invited patients and colleagues to help us shape our values and our behaviours in interactive workshops and a range of surveys.

We had about 2000 members of staff engage in the process and more than 600 patients. The feedback has been tremendous.

The initial analysis is with us now. Not all of the stories told were illustrations of us being at our best, but people felt they had been heard. Here's just a taster of some of the feedback and we look forward to sharing more with you in the next few weeks, along with some areas for improvement.

What our patients said...

The nurses were wonderful,
nothing was a bother

Clinicians invite people to talk to them. **You feel connected.** What matters is how you're made to feel during your journey.

I was exasperated
I had to tell my story over and over again.

The cleaner chatted to us while she worked. She worked hard but still managed to **liven up our day.**

They told me I was going to have surgery. I **waited**. At 7pm they told I wasn't going to.

We are having a **karakia and the doctor walks in** and just carries on

What children said...

Check on us nicely
and rub our neck.

They try their hardest everyday

Not getting fixed
and sitting in bed

People talking loudly
when I'm trying to sleep

What our staff said...

Laughter, fun and smiles.
Having lunch together. It lightens the mood and I connect with colleagues.

Rude, arrogant emails. Leave you feeling sad, disappointed and angry.

Feel part of my team. We are like a family. We agree to achieve **common goals.** We are in sync and effective

Recognised and **thanks** for using my skills. **I feel valued and encouraged.**

Over-worked.

Bombarded with lots of little things. Pressure, feeling overwhelmed.

Put your **heart and soul into work** and it feels like **no-one appreciates it.**

Senior Leadership Team at Auckland DHB



Ailsa Claire
Chief Executive



AUCKLAND
DISTRICT HEALTH BOARD
Te Toka Tumai

Executive Leadership Team



Dr Andrew Old
Chief of Strategy,
Participation and
Improvement



Dr Debbie Holdsworth
Director of Funding
– Auckland and
Waitemata DHBs



Fionnagh Dougan
Director of Provider
Services



Linda Wakeling
Chief of Intelligence
and Informatics



Margaret Dotchin
Chief Nursing
Officer



Dr Margaret Wilsher
Chief Medical Officer



Naida Glavish
Chief Advisor Tikanga
and General Manager Maori
Health – Auckland and
Waitemata DHBs



Rosalie Percival
Chief Financial
Officer



Simon Bowen
Director of Health
Outcomes –
Auckland and
Waitemata DHBs



Sue Waters
Chief Health
Professions
Officer



Vivienne Rawlings
Chief Human
Resources
Officer

Directorate Leadership Teams

Adult Medical Services



Dr Barry Snow
Director



Brenda Clune
Nurse Director



Dr Rob Wallace
Director, Primary Care



Carolyn Simmons Carlsson
Allied Health Director

Cancer and Blood Services



Dr Richard Sullivan
Director



Kelly Teague
General Manager

Adult Community and Long Term Conditions



Judith Catherwood
Director



Jane Lees
Nurse Director



Anna McRae
Allied Health Director

Cardiac Services



Dr Mark Edwards
Director



Kristine Nicol
Allied Health Director



Dr James Kriechbaum
Director, Primary Care

Perioperative Services



Dr Vanessa Beavis
Director



Anna MacGregor
Nurse Director

Surgical Services



Dr Wayne Jones
Director



Tara Argent
General Manager



Dr Kathryn McDonald
Director, Primary Care

Clinical Support



Frank Tracey
General Manager and
Acting Director



Moses Benjamin
Allied Health Director

Children's Health



Dr John Beca
Director Surgical



Sarah Little
Nurse Director



Dr Michael Shepherd
Director Medical



Emma Maddren
General Manager



Dr Barnett Bond
Director, Primary Care



Linda Haultain
Allied Health Director

Women's Health



Dr Sue Fleming
Director



Maggie O'Brien
Midwifery Director



Karin Drummond
General Manager



Dr Diana Good
Director, Primary Care

Mental Health



Dr Clive Bensemann
Director



Anna Schofield
Nurse Director

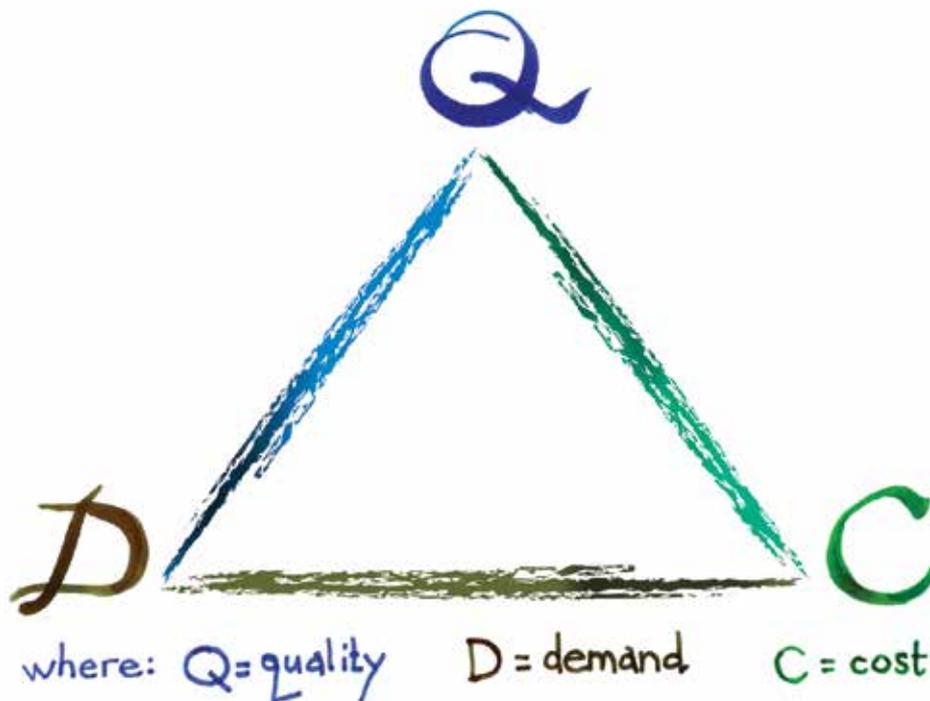


Maria West
General Manager



Mike Butcher
Allied Health Director

Clinical leadership at the *heart* of our organisation



Auckland DHB provider services are the largest and most complex in New Zealand, serving the needs of our local population and the rest of New Zealand. Late last year we took the first steps to embed single point of accountability and clinical leadership which we believe will enable us to respond to the challenges posed when your job is to deliver health care in the 21st century.

The steps sound simple, but the flow on effects will be significant. In their work, as much as any part of their life, people need to know who is accountable. They also want to be able to achieve a degree of autonomy in their work so they can respond to the needs of patients. Previously our provider services had several people jointly accountable for the decisions in our service areas. Sometimes the partnerships worked, at other times there was confusion and layers of bureaucracy. There was certainly no consistency.

So Auckland DHB has created 11 health Directorates in the provider part of our organisation. (see Senior Leadership Team chart on the previous page). Staff in these Directorates have the right to know who makes the call and why. This is now a single individual; the Director. That Director needs to know their decisions are made with a clear line of accountability and they have the support in their team to enable them to be successful. Thus their team is now drawn from finance, general management, allied health, nursing, decision support, improvement, medical, HR and primary care. We call this the single point of accountability and that point of accountability is a clinician.

Putting clinical leadership at the heart of each of our 11 health Directorates affirms that decision-making needs to sit as close as possible to patients.

Research conducted by McKinsey and the London School of Economics, among others, has found that hospitals with the greatest clinician participation in management score 50 per cent higher on a range of important drivers of performance than hospitals where clinical leadership is low.

By empowering clinical leadership and creating clearly accountable decision-making the international evidence is that the Directorates will be quick to innovate; build better relationships between clinical and non-clinical staff; and there will be a renewed emphasis on clinical quality and patient safety.

The clinical leaders of our Directorates are working hard to be clear about what quality means and what impact that has on patient experience, care and safety.

Imagine a triangle that contains a Directorate's resources and people. On each of the triangle's corners is a key driver. On one corner is Quality. On the next is Cost. On the final corner is Demand. The job of the 11 Directorates is to put Quality firmly at the top of the triangle. Cost and Demand are constants that have to be factored into decisions, but the Directorate leaders have Quality as the key driver for their decisions.

Quality needs to be defined in a way that is shared. Staff and managers need to do the right thing at the right time for the right person. When people come to clinical services, their experience should be consistent, positive and clear in purpose and action. Auckland DHB's reputation for excellence should attract the best and the brightest.

By putting Quality at the top of our organisational triangle, the aim is to exert better control on Demand and Cost. If Quality means the patient is treated right the first time the patient gets to go home sooner. Demand decreases and cost reduces.

When patients have a Quality experience they are more likely to follow advice and get better sooner. Again, demand decreases and cost reduces.

Clinical leadership and the single point of accountability mechanism are the foundation for the Directorates. Clear accountability and a clinical perspective that sits close to the patient is what we need to create an organisation that is agile and smart in response to what the future brings.

Best foot forward to reduce falls

On 1 September an enthusiastic multi-disciplinary team of allied health, nursing, medical and quality and safety staff launched the 'Falls Concept Ward Initiative' in Marino Ward, 14C.

A package of innovative and well-tested interventions, developed collaboratively by Older People's Health leads has been rolled out, with the aim of reducing falls with harm in the hospital setting by 20 percent.

One new idea is that after being assessed, all patients wear red, orange and green coloured wristbands to distinguish the level of mobility assistance they require – red for hands-on assist, orange for supervision, and green for independent.

The team will proactively check on patients' needs using intentional rounding with a focus on toileting needs, position in bed, pain and medication levels.

Other ideas to be introduced this year are a delirium-screening tool, improved toilet signage, and a post-fall review process, which involves input from multiple team members, including Pharmacy.

According to Andrew Jull, Nurse Advisor for Quality and Safety, another positive flow-on effect of a cross-team working approach is the increased communication and collaboration between allied health staff, educators and nurses.

The enthusiasm for the project is reflected by Charge Nurse, Lorraine Aramoana-Thompson.

"I am excited about the different initiatives," she says. "All of our staff and educators have been amazing and I have high hopes that this project will produce the desired outcomes for our vulnerable patient group."

Chief Nursing Officer, Margaret Dotchin agrees.

"As an organisation, we needed to take that next step towards evaluating and targeting the reduction of falls in the hospital and Marino Ward will now lead the charge as a test bed for new ideas," she says.

To track and measure the impact these new initiatives may have over coming months, staff will record the days since various types of falls have occurred on the ward. A storyboard on the ward will also capture information as a way for staff to see progress visually at a glance, and progress can be referenced at regular ward meetings.

(Bottom) Allied health physiotherapist Susan Harrison fits Marino ward patient Bonnie Hildreth with her mobility assistance wrist band.

(Below) Some of the team involved in the Falls Concept ward initiative.



Alliancing our way to enhanced patient and population outcomes



Dr Lester Levy, Board Chair

New relationships, changing paradigms, a lot of hard work and unprecedented goodwill resulted in the signing of an alliance agreement in September. The partners that form the Alliance Agreement are Te Rununga O Ngati Whatua, Te Whanau o Waipareira, Alliance Health Plus, Auckland PHO, National Hauora Coalition, ProCare, Total Healthcare, Waitemata PHO and the Auckland and Waitemata District Health Boards.

The purpose of the new alliance agreement is to develop a community health system that is more cohesive, accessible, efficient, effective, safe and sustainable. We want to see seamless end-to-end care through better integration of community, primary care and secondary care health services.

This will be achieved through a locality approach leading to greater flexibility in how services are provided and what providers actually do. To achieve this primary care, capability and capacity will need to be elevated.

Reducing health inequalities is another emphasis of the alliance partners. This will require a greater focus to supporting

individuals and communities to improve their own health.

The underlying principles in the agreement are to support clinical governance through clinician engagement, design services to achieve the desired outcomes and improve performance through quality, transparent reporting and effective mechanisms for public accountability.

The very positive and well-attended signing ceremony took place at Auckland City Hospital. In the speeches preceding the signing, the dominant theme from each of the alliance partners was about the positive environment from which this alliance agreement had emerged and the responsibility now felt by all to deliver on both the purpose and goals.

The event was also an opportunity for myself and Ailsa Claire to congratulate and thank the PHOs for their determination and performance in respect of the national primary care health targets.

Bryn Jones and Karen Evison, Ministry of Health target champions, came along to the event to present Ailsa Claire with a certificate to acknowledge the PHOs' and our achievements against the national primary health targets – quit smoking and heart and diabetes checks. I am extremely proud that we are one of only two DHBs nationwide to have achieved both targets.

As always, the targets are not an end in themselves, but rather a means to an end and the primary care target performance simply shows that together we are capable of achieving anything we set our minds to.

However, the real winners of achieving the targets, along with a successful implementation of the alliance agreement, are our patients and our population.

Feetbeat Challenge - How are your feet?



Taylor Centre Striders are enjoying supporting each other and intend to finish the challenge and continue their daily exercise after it ends.

We are well into the Feetbeat Challenge with 29 teams (including more than 190 staff members) motivating each other to walk 30 minutes a day for eight weeks. It has been great to see staff setting off up One Tree Hill or meandering through the Winter Garden at the Auckland Domain during breaks. We asked a few teams to share their tips for completing the challenge.

Taylor Centre Striders (20 members)

"As exercise has proved to reduce anxiety and depression, we know this is not only hugely beneficial for our own health, but for our patients too. We believe mental health professionals should reinforce the health benefits from regular exercise to their patients." – Taylor Centre Striders.

Team Strategy (4 members)

Team Strategy is enjoying getting outdoors now that the weather is better and the daffodils are out. The team has definitely noticed that when they tell people in the office that they're heading out for a walk, others join them – so spread the word and extend the invitation!



'Simone Ghirardi of Ompeco empties hospital waste into the new waste convertor.'

Waging the war on waste

Waste disposal just got a whole lot more exciting. In September, Auckland City Hospital became the first hospital nationally to introduce a waste convertor machine for a six-month initial 'proof of concept' trial period.

The waste converter is a self-contained machine that treats and recycles solid and liquid waste material. It will take hospital waste (non-sharp items) and reprocess it into a material known as Refuse Derived Fuel (RDF); this becomes a sterile fluff that can be handled safely. RDF is also used as a non-toxic biofuel, making it more cost effective than burning fossil fuels.

This technology offers the organisation an extremely environmentally friendly alternative to our current means of waste disposal, such as landfill dumping. The prediction is that this smaller scale model convertor will reduce the hospital's carbon footprint significantly by reducing the amount of waste going into landfill each month by more than 100kg.

Our staff who manage the waste received training last month from technicians who came over from the UK and Italy to ensure a safe and correct staff procedure.

Currently the hospital spends around \$1 million every year on waste disposal and transportation costs. If installed in future, the larger scale convertor would cut this figure by 40-50 per cent annually.

Sustainability Manager, Emma Bowyer-Warner says: "This machine will revolutionise how we convert our waste at Auckland DHB. As well as the obvious environmental benefits to doing this, the cost saving is potentially between \$400,000 and \$500,000 annually if the larger model is introduced after the initial trial period."



Sustainability

OUR PATHWAY TO A GREEN & HEALTHY FUTURE

Māori Health Plan 2014-2015

The Māori Health Plan 2014-2015 is now available on our website in publications – under "M". This plan provides Auckland DHB and our local health services with priority areas for action over the next 12 months and specifies accountabilities.

One of the key functions of a DHB is to reduce inequalities in health status by improving the health outcomes of Māori. This requires shared action across the health sector, keeping Māori health at the forefront of planning, funding and service-delivery activities.

The principles that underpin this work will be:

- Commitment to manawhenua
- Health equity
- Self-determination
- Indigeneity
- Ngā kaupapa tuku iho
- Whole-of-DHB responsibility
- Evidence-based approaches

By 2020 we want to see Māori in our region living longer and enjoying a better quality of life with fewer avoidable problems and hospitalisations. We want to see a system that is responsive, integrated, well resourced and sustainable so that gains we make today can be built upon by future generations. These ambitions are certainly achievable and will be one of the key ways in which our success as a DHB and as health professionals will be measured in years to come.



We did it!

Auckland DHB meets all six health targets

We are delighted to have achieved all six national health targets for the period April to June 2014.

Auckland is one of only two DHBs to accomplish this, and these outstanding results clearly show us as a high-performing organisation focused on meeting the needs of our patients.

With the support of our local Primary Health Organisations (PHOs), we were able to achieve two key community targets that support people to maximise their health and wellbeing. These were in heart and diabetes checks, for which we were highest in the country, and in better help to support smokers to quit.

Congratulations to everyone involved and thank you for your hard work.

A busy winter

We would like to say a huge thank you for everyone's continued hard work and commitment to providing high quality care throughout the winter.

An increased number of patients to our emergency departments and a late hard-hitting flu season all contributed to a very busy season.

Every day in August more than 170 patients presented at the Adult Emergency Department, where on some days there were more than 200 patients. Starship has seen similar increases, with around 600 more children coming into the Children's Emergency Department in August compared with the same time last year.

Despite these challenges, teams and individuals have all pulled together to keep the hospital running for our patients.

As we move into spring, we hope that the worst is behind us but we thank you all again for doing such a sterling job.

The Ministry of Health congratulates Auckland DHB and PHOs for achieving both community targets. L-R Barbara Stevens, Auckland PHO; Alan Wilson, Alliance Health Plus; Tim Wood, Auckland and Waitemata DHBs; Dr Bryn Jones and Karen Evison, Ministry of Health; CEO Ailsa Claire; Steve Boomert, ProCare and Kate Moodabe, Alliance Health Plus.

New campaign won't let #FallsRuinTheFun

One of the coolest things about kids is their potential, the chance to do or become whatever they can imagine. But what if something happens during childhood that stops them from reaching that potential – such as a serious fall injury?

Every year, close to 4,000 children are hospitalised due to a serious fall injury. That's about one sports team (11 children) out of action every day. Serious fall injury is also a major economic and social burden. ACC claim costs amount to \$45 million per year.

This year, Safekids Aotearoa is running the #FallsRuinTheFun public awareness programme focused on playground and trampoline safety. Its radio campaign will run until the end of summer 2015, and posters and flyers will feature plaster casts to create a strong visual symbol to the consequences of serious fall.

"We often see 'selfies' of children wearing casts because, to them, it symbolises a badge of honour for surviving a serious injury," says Ann Weaver, Safekids Aotearoa Director.

However, casts also represent the long-term costs of a serious fall. "These include disability, dependence on others, lost time from work by parents, children missing school and sports, and reduced quality of life."

Support the #FallsRuinTheFun campaign. Email campaign@safekids.org.nz to order resources or follow them on Facebook (search for Safekids Aotearoa).



Nova is published by Auckland DHB Communication Team. If you have a story to share with the Auckland DHB Team please contact the Communication Team on ext 26556, email ADHBcommunications@adhb.govt.nz or write to us: Level 2, Building 16, Greenlane Clinical Centre.

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